Research and Development of HIV vaccine should be vigorously pursued; and

Effective efforts for prevention need to be put in place, that will combine education, information and delivery of services to bring about behavioural changes

(c) Brazil has shown a long standing commitment to providing universal ARV (antiretroviral) treatment.

Thailand has introduced antiretroviral treatment though clinical trials and subsidy for ARV for HIV positive mothers.

(d) India highlighted its own National AIDS Control Programme at the conference. Based on discussions with experts at the conference, the following issues have emerged:

(i) India needs a much higher commitment of resource to:

Upscale and extend outreach and coverage of its targeted interventions for prevention care and support to persons infected with HIV and AIDS.

(ii) India needs to articulate clearly its stand on what will constitute care and support for persons affected with HIV and AIDS.

(iii) India needs to examine the availability and costing of generic drugs, indigenously produced, and may initiate a dialogue with the pharmaceutical industry.

Blood Donation Camps

1930. DR. ABRAR AHMED:
SHRISANTOSH BAGRODIA:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

whether only those organizations should be allowed to hold blood donation camps that can facilitate to get the blood tested of HIV/AIDS and other serious diseases so as to minimize the level of risk at the Donation centre;

if so, whether such organizations could be instructed to do the same;

(c) whether there is any plan to provide operational and implementation assistance to such organizations; and

(d) if so, the details thereof?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI A. RAJA): (a) and (b) Blood donation camps can be held by only Government Blood Banks, Indian Red Cross Society Blood Banks or Blood Banks designated as Regional Blood Transfusion Centres by State Blood Transfusion Councils. Also, it is mandatory for all the Blood Banks to be licensed and to carry out mandatory tests for TransfusionTransmitted Diseases including HIV/AIDS before issue of blood for transfusion.

(c) and (d) All Blood Banks in the country are required to function as per the provisions of Drugs and Cosmetics Rules. Annual recurring grant to meet operational expenses are being provided to all Government and some voluntary sector blood banks.

Recognition of Medical College in Delhi

1931. PROF. M. SANKARALINGAM: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

whether it is a fact that MCI has refused to recommend a college in Delhi for recognition after a year of its inception, as appeared in the Indian Express, dated 3rd July, 2002;

if so, the reasons for such a decision by MCI;

what will happen to the students of this medical college;

the problems being faced by this medical college and students; and

the criteria fixed by MCI to recommend a medical college for recognition?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI A. RAJA): (a) to (e)The administrative approval was given by the Central Government for setting up of Vardhman Mahavir Medical College at Safdarjung Hospital, New Delhi after satisfying itself of the facilities available. Permission for establishment of new medical college is given initially for a period of one year subject to renewal on annual basis till the college is recognised by the Medic?.! Council of